# P08000053881

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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: HOME RENOVA	TION EXPERTS INC.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	JESUS F. BUJAN		
		Name of Contact Persor	1
	JESUS F. BUJAN PA		
		Firm/ Company	
	782 NW 42 AVENUE SUIT		
		Address	
	MIAMI FLORIDA 33126		
		City/ State and Zip Code	2
bujan	@bujanmarichallaw.com		
<del></del>	= -	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
JESUS F. BUJAN		at (	de & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Tele		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

#### Articles of Amendment

#### Articles of Incorporation

of

#### HOME RENOVATION EXPERTS INC.

#### (Name of Corporation as currently filed with the Florida Dept. of State)

PO8000053887

	1 0000003007	
(Docum	ent Number of Corporation (if known	wn)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpo	oration adopts the following amendmen
A. If amending name, enter the new name of the col	rporațion:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the d	" "Inc," or "Co". A professiona	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>		
·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u></u>	
D. If amending the registered agent and/or register	ed office address in Florida, ente	r the name of the
new registered agent and/or the new registered of		Tare hance of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
ness registered Office radioests	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered accept the appointment as registered agent.		abligations of the position
тистелу иссерстве арролител из гедіметей идет.	i um jummae wan una accept ne o	ongunom vy are positiva.
Signe	ature of New Registered Agent, if cl	hanging

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director, TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	$\underline{V}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	V		LIVAN MARQUEZ	20810 SW 234 STREET
X Add				HOMESTEAD FLORIDA 33031
Remove				
2) Change		_		
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change	<del></del>	_		
Add				
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
	····	
If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(y an appacane, macare post		

The date of each amendment(s) ac	August 9, 2019	if all an draw it
date this document was signed.	loption:	, it other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	ſ
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
action was not required	pted by the incorporators without shareholder action and shareholder	
Dated	8/9/19	
Signature	Man	
	rector, president or other officer - if directors or officers have not been	
	I. by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	President	
	1 reci Loyr	
	(Title of person signing)	